

FORM 103 - 0

MARC	H 1,	20

For assessor's use only

PRIVACY NOTICE

The records in this series are CONFIDENTIAL according to I.C 6-1.1-35-9.

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INSTRUCTIONS: Attach to and file with Form 10	2 or 103.					
Name of owner (please print or type)					County	
Address of owner (number and street, city, state, ZIP c	ode)				Taxing district	
Report all personal property owned by t year, in Schedule I or Schedule II. (If Sp						
Si	CHEDULE I - ASSESSE	D TO OWNER (ON FORM 102 OR	103		
Information return of all personal property owner assessment year by this taxpayer but which was	d (including operating le	ases) and reporte	ed for assessment		or 103 as of Mar	ch 1 of the current
NAME AND ADDRESS OF PERSON POSSESSING PROPERTY	LOCATION OF PROPERTY	DATE OF LEASE	MODEL NUMBER AND DESCRIPTION	LINE NO. REPORTED 102 OR 103	QUANTITY	COST PER REGULATION #16
Schedule I includes, but is not limited to, the	 reporting of:				TOTAL	

Consigned Inventory; Other Inventory; Returnable Containers; Operating Leases; and all other property owned by this taxpayer but held, possessed or controlled by another person.

Excluded from Schedule I is:

FORM 103 - 0	SCHEDULE II			MARCH 1, 20		
Name of owner (please type or print)					County	
Address of owner (number and street, city, state, ZIP code)					Taxing district	
Report all personal property owne year, in Schedule I or Schedule II. TO BE AS		m 103-T) (See Re	egulation 16, Rule 2	, Sec. 4 and 5	and Rule 8, Se	
Information return of all personal property owned by this taxpayer which is classified as a capital lease per Regulation 16, Rule 8, Section 4 and which was reported for assessment as of March 1 of the current assessment year by the person holding, possessing or controlling the property as listed in Schedule II.						
NAME AND ADDRESS OF PERSON POSSESSING PROPERTY	LOCATION OF	DATE OF LEASE	MODEL NUMBER AND DESCRIPTION	LINE NO. REPORTED 102 OR 103	QUANTITY	COST PER REGULATION #16
					TOTAL	